United States Bankruptcy Court Eastern District of Washington				Voluntar	y Petition	
			Name of Joint Debtor (Spouse) (Last, First, Middle): Bolen, Leasa M.			
All Other Names used by the Debtor in the last 8 years		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): fka Leasa M. Beeler				
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all): 6717	/er I.D. (ITIN) No./Complete EIN		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 3608			
Street Address of Debtor (No. and Street, City, a 21552 E. Bitterroot Ln Liberty Lake, WA	·	Street Address of Joint Debtor (No. and Street, City, and State 21552 E. Bitterroot Ln				
-	ZIPCODE 99019	Liberty Lake, WA ZIPCODE 99019				
County of Residence or of the Principal Place of Spokane	Business:	County of R Spokane	Residence or of the Principal Pl	ace of Business:		
Mailing Address of Debtor (if different from stre	eet address):		dress of Joint Debtor (if differe	ent from street add	dress):	
	ZIPCODE	_			ZIPCODE	
Location of Principal Assets of Business Debtor	(if different from street address a	lbove):			ZIPCODE	
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) Health Care Business Single Asset Real Estate as def 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank	Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13	hkruptcy Code Unis Filed (Check Chapter 15 P. Recognition of Main Proceed Chapter 15 P. Recognition of Nonmain Pro	one box) Petition for of a Foreign ding Petition for of a Foreign		
	Other Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)		Nati (Che Debts are primarily conditions of the conditions of th	U.S.C. by an for a	Debts are primarily business debts	
Filing Fee (Check one box) Check one box: Chapter 11 Debtors Debtor is a small business as defined in 11 U.S.C. Debtor is not a small business as defined in 11 U.S.C. Eiling Fee to be paid in installments (Applicable to individuals only) Must attach Check if:				- '		
Filing Fee to be paid in installments (Applicable to individuals only) Must atta signed application for the court's consideration certifying that the debtor is unabto pay fee except in installments. Rule 1006(b). See Official Form No. 3A.						
Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes, in accordance with 11 U.S.C. § 1126(b).						
Statistical/Administrative Information					THIS SPACE IS FOR	
Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						
Estimated Number of Creditors 1-49 50-99 100-199 200-999	1000- 5000 10,000	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000		
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 to \$1 million	1 \$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion		
Estimated Liabilities	1 \$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion		

B1 (Official Fo	rm 1) (1/08)		Page 2		
Voluntary Pe (This page must be	etition e completed and filed in every case)	Name of Debtor(s): Ronald S. Bolen & Leasa M. Bolen			
	All Prior Bankruptcy Cases Filed Within Last 8 Years (
Location	• •	Case Number:	Date Filed:		
Where Filed: Ea	stern District of Washington	04-01307	02/20/2004		
Location Where Filed: N.	А.	Case Number:	Date Filed:		
Pending Ba	ankruptcy Case Filed by any Spouse, Partner	or Affiliate of this Debtor (I	f more than one, attach additional sheet)		
Name of Debtor:		Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A Exhibit B (To be completed if debtor is an individual				
	if debtor is required to file periodic reports (e.g., forms	whose debts are primarily consumer debts)			
10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) I, the attorney for the petitioner named in the foregoing petition, declare that I have in the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, U States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b)					
☐ Evhibit A	is attached and made a part of this petition.	x /s/ Elizabeth M. McF	Bride 10/09/2009		
LAINOR A	is attached and made a part of this petition.	Signature of Attorney for D			
l _	wn or have possession of any property that poses or is alleged exhibit C is attached and made a part of this petition.	1 to pose a threat of imminent and ide	entifiable harm to public health or safety?		
Exhibit I If this is a joint pe	d by every individual debtor. If a joint petition is filed, each completed and signed by the debtor is attached and made a	a part of this petition.	eparate Exhibit D.)		
	Information Reg	arding the Debtor - Venue			
(Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.					
	Debtor is a debtor in a foreign proceeding and has its pri or has no principal place of business or assets in the Unit court] in this District, or the interests of the parties will be	ted States but is a defendant in an acti	ion or proceeding [in federal or state		
	Certification by a Debtor Who Resi (Check all a	ides as a Tenant of Residenti	ial Property		
Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.)					
	(Name of	landlord that obtained judgment)			
	74.11	of landland)			
	(Address Debtor claims that under applicable non bankruptcy law, entire monetary default that gave rise to the judgment for				
	Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.				
	Debtor certifies that he/she has served the Landlord with	this certification. (11 U.S.C. § 362(1)).		
1					

B1 (Official Form 1) (1/08)	Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Ronald S. Bolen & Leasa M. Bolen
	ntures
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct.	Signature of a Foreign Representative
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.
X /s/ Ronald S. Bolen	Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
Signature of Debtor	X
digitative of Beston	
X /s/ Leasa M. Bolen	(Signature of Foreign Representative)
Signature of Joint Debtor	
	(Printed Name of Foreign Representative)
Telephone Number (If not represented by attorney)	
10/09/2009	
Date	(Date)
Signature of Attorney*	
X /s/ Elizabeth M. McBride	Signature of Non-Attorney Petition Preparer
Signature of Attorney for Debtor(s)	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer
ELIZABETH M. MCBRIDE 16035 Printed Name of Attorney for Debtor(s)	as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition
Firm Name 1201 N Ash #101 Address	preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Spokane, WA 99201	
_509.838.0435 lisa@lisamcbride.com Telephone Number e-mail	Printed Name and title, if any, of Bankruptcy Petition Preparer
	Social Security Number (If the bankruptcy petition preparer is not an individual,
<u>10/09/2009</u> Date	state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Address
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date
	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
XSignature of Authorized Individual	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets
Title of Authorized Individual	conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT Eastern District of Washington

In re_	Ronald S. Bolen & Leasa M. Bolen	Case No
	Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit

I certify under penalty of perjury that the information provided above is true and correct.

counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

Signature of Debtor:	/s/ Ronald S. Bolen	
	RONALD S. BOLEN	
Date	10/09/2009	

UNITED STATES BANKRUPTCY COURT Eastern District of Washington

In re_	Ronald S. Bolen & Leasa M. Bolen	Case No
	Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.

I certify under penalty of perjury that the information provided above is true and correct.

counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

5. The United States trustee or bankruptcy administrator has determined that the credit

Signature of Joint Debtor:	/s/ Leasa M. Bolen
	LEASA M. BOLEN
Date	10/09/2009

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

In re	Ronald S. Bolen & Leasa M. Bolen	Case No
	Debtor	(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Tota		0.00	
	INTEREST IN PROPERTY		NATURE OF DEBTOR'S INTEREST IN PROPERTY OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION

(Report also on Summary of Schedules.)

In re	Ronald S. Bolen & Leasa M. Bolen	Case No	
	Debtor	(If known)	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
Security deposits with public utilities, telephone companies, landlords, and others.		RENT DEPOSIT LANDLORD	J	300.00
Household goods and furnishings, including audio, video, and computer equipment.		COUCH 200.00 CHAIR 100.00 TABLES 50.00 TV 25.00 RESIDENCE	J	375.00
		LAMPS 25.00 DINETTE 50.00 BEDS 200.00 DRESSERS 25. RESIDENCE	J	300.00
		MICRO 10.00 COMPUTER 100.00 RESIDENCE	J	110.00
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.6. Wearing apparel.	X	CLOTHING RESIDENCE	J	200.00

In re	Ronald S. Bolen & Leasa M. Bolen	Case No	
	Debtor	(If known)	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
7. Furs and jewelry.		JEWELRY RESIDENCE	J	200.00
Firearms and sports, photographic, and other hobby equipment.	X			
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
 Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars. 	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			

In re	Ronald S. Bolen & Leasa M. Bolen	Case No		
	Debtor		(If known)	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
23. Licenses, franchises, and other general intangibles. Give particulars. 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X	2006 DODGE RAM RESIDENCE	J	15,435.00
25. Automobiles, trucks, trailers, and other vehicles and accessories.		HONDA MOTORCYCLE RESIDENCE	J	3,000.00
		2004 CHRYSLER PT CRUISER RESIDENCE	J	6,225.00
		2001 PONTIAC GRAND PRIX (SON'S CAR) RESIDENCE	J	3,000.00
		HONDA (DAUGHTERS CAR) RESIDENCE	J	2,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
	1	0 continuation sheets attached Tot	al	\$ 31,145.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.) Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 44.9-740 - 31629 - PDF-XChange 3.0

In re	Ronald S. Bolen & Leasa M. Bolen	Case No.	
	Debtor	(If know	wn)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitle	d under:
(Check one box)	

abla	11 U.S.C. § 522(b)(2)	Check if debtor claims a homestead exemption that exceeds
П	11 U.S.C. § 522(b)(3)	\$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
2001 PONTIAC GRAND PRIX (SON'S CAR)	(Husb)11 U.S.C. 522(d)(2)	3,000.00	3,000.00
HONDA (DAUGHTERS CAR)	(Wife)11 U.S.C. 522(d)(2)	2,000.00	2,000.00
RENT DEPOSIT	(Husb)11 U.S.C. 522(d)(5)	300.00	300.00
COUCH 200.00 CHAIR 100.00 TABLES 50.00 TV 25.00	(Husb)11 U.S.C. 522(d)(3)	375.00	375.00
LAMPS 25.00 DINETTE 50.00 BEDS 200.00 DRESSERS 25.	(Husb)11 U.S.C. 522(d)(3)	300.00	300.00
MICRO 10.00 COMPUTER 100.00	(Husb)11 U.S.C. 522(d)(3)	110.00	110.00
CLOTHING	(Husb)11 U.S.C. 522(d)(3)	200.00	200.00
JEWELRY	(Husb)11 U.S.C. 522(d)(4)	200.00	200.00

In re	Ronald S. Bolen & Leasa M. Bolen	Case No.	
	Debtor	(If known)	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 6034623007099159			Lien: PMSI					1,138.27
GE MONEY BANK ATTN: BANKRUPTCY DEPT PO BOX 103104 ROSWELL GA 30076		J	Security: HONDA MOTORCYCLE				4,138.27	1,130.2
			VALUE \$ 3,000.00					
ACCOUNT NO.8740578344			Incurred: 2007					5,527.66
WACHOVIA PO BOX 659558 SAN ANTONIO TX 78265-9558		J	Lien: PMSI Security: 2006 DODGE RAM				20,962.66	
			VALUE \$ 15,435.00	'				
ACCOUNT NO. 8090334854			Incurred: 2004 Lien: PMSI					6,426.03
WACHOVIA PO BOX 659558 SAN ANTONIO TX 78265-9558		J	Security: 2004 CHRYSLER PT CRUISER				12,651.03	6,120.00
			VALUE \$ 6,225.00					
0continuation sheets attached			(Total o		tota		\$ 37,751.96	\$ 13,091.96
			(Use only o				\$ 37,751.96	\$ 13,091.96

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In re	Ronald S. Bolen & Leasa M. Bolen	, Case No.
	Debtor	(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related

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	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations
or re	Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended a sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended as a sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended as a sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended as a sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended as a sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended as a sponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extended as a sponsible relative of such as a sponsible

legal guardian, nt provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Ronald S. Bolen & Leasa M. Bolen In re	, Case No.
Debtor	(if known)
Certain farmers and fishermen	
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisher	man, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals	
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or that were not delivered or provided. 11 U.S.C. § 507(a)(7).	rental of property or services for personal, family, or household use,
☐ Taxes and Certain Other Debts Owed to Governmental Units	
Taxes, customs duties, and penalties owing to federal, state, and local gove	ernmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Insti	itution
Claims based on commitments to the FDIC, RTC, Director of the Office of Governors of the Federal Reserve System, or their predecessors or successors, t U.S.C. § 507 (a)(9).	
☐ Claims for Death or Personal Injury While Debtor Was Intoxicated	
Claims for death or personal injury resulting from the operation of a motor alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	vehicle or vessel while the debtor was intoxicated from using
* Amounts are subject to adjustment on April 1, 2010, and every three years the adjustment.	ereafter with respect to cases commenced on or after the date of

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In re Ronald S. Bole	n & Leasa M. Bolen,	Case No
	Dahtan	(Tf 1)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6019181841597754 ALLIED INTERSTATE PO BX 361477 COLUMBUS OH 43236		W	Consideration: COLLECTION COLLECTING FOR GE MONEY BANK CARE CREDIT				1,055.00
ACCOUNT NO. 6044100615626678 AMERICAN EAGLE OUTFITTERS PO BOX 981064 EL PASO TX 79998-1064		J	Consideration: Revolving charge account				215.77
ACCOUNT NO. 401702165350576 BENEFICIAL FINANCE PO BOX 3425 BUFFALO NY 14240		W	Consideration: OPEN ACCT				7,358.94
ACCOUNT NO. 4862362570010135 CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130-0285		Н	Consideration: Credit card debt				472.19
continuation sheets attached				Subt T	otal otal		\$ 9,101.90 \$

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In re	Ronald S. Bolen & Leasa M. Bolen	,	Case No			
	Debtor			(If known)		

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5178052497874061			Consideration: Credit card debt				
CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130-0285		Н					622.10
ACCOUNT NO. 671201190107169			Consideration: OPEN ACCOUNT				
CITIFINANCIAL 101 IRONWOOD DR #133 COERU D'ALENE ID 83814		J					5,278.01
ACCOUNT NO. 6004669403168243			Consideration: Revolving charge account				
FASHION BUG 745 CENTER ST MILFORD OH 45150-1324		W					1,302.21
ACCOUNT NO.			Consideration: PAYDAY LOAN				
FAST BUCKS OF POST FALLS LLC 3869 W RIVER BEND POST FALLS ID 83854		J					847.00
ACCOUNT NO. 6019181841597754 GE MONEY BANK ATTN: BANKRUPTCY DEPT PO BOX 103104 ROSWELL GA 30076		W	Consideration: Credit card debt SENT TO COLLECTION CARE CREDIT				Notice Only
Sheet no. 1 of 3 continuation sheets attact to Schedule of Creditors Holding Unsecured	ched			Sub	tota	ı >	\$ 8,049.32
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(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Ronald S. Bolen & Leasa M. Bolen	,	Case No			
	Debtor			(If known)		

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. 5407915013973877 HSBC CARD SERVICE PO BOX 81622 SALINAS CA 93912-1622		W	Consideration: Credit card debt				347.11	
ACCOUNT NO. 0420601102408165 HSBC RETAIL SERVICES PO BOX 5244 CAROL STREAM IL 60197-5244		W	Consideration: Credit card debt				2,671.67	
ACCOUNT NO. 5049940124435560 SEARS CREDIT CARDS PO BOX 6283 SIOUX SD 57117	•	J	Consideration: Credit card debt				1,022.55	
ACCOUNT NO. 153551406405 US BANK HWY 27 & 32ND AVE ALBERTONS 9208 E SPRAGUE AVE SPOKANE VALLEY WA 99206			Consideration: OVERDRAFT				1,017.00	
ACCOUNT NO. 08314720 WELLS FARGO FINANCIAL 411 W HAYCRAFT STE B2 COEUR D' ALENE ID 83815		J	Consideration: LINE OF CREDIT				338.50	
Sheet no. 2 of 3 continuation sheets attact to Schedule of Creditors Holding Unsecured Nonpriority Claims	to Schedule of Creditors Holding Unsecured							

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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Nonpriority Claims

In re	Ronald S. Bolen & Leasa M. Bolen	,	Case No.		
	Debtor	·		(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4071100021191204			Consideration: Credit card debt				
WELLS FARGO FINANCIAL CARDS PO VOX 5943 SIOUX FALLS SD 57117		J					2,064.31
ACCOUNT NO.							
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In re	Ronald S. Bolen & Leasa M. Bolen	Case No.	
	Debtor		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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In re	Ronald S. Bolen & Leasa M. Bolen	Case No.		
	Debtor		(if known)	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

In re_	Ronald S. Bolen & Leasa M. Bolen	Case		
	Debtor	Case	(if known)	

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital	DEPENDENTS (OF DEBTOR AND	SPOUSE						
Status: Married	RELATIONSHIP(S): daughter, son, son		AGE(S): 18, 17, 9						
Employment:	DEBTOR		SPOUSE						
Occupation	SHEET METAL WORKER	PAYROLL							
Name of Employer	APOLLO SHEET METAL	CPM DEVE	LOPMENT						
How long employed	5 MONTHS	10 1/2 YRS							
Address of Employer	TRI CITIES WA	PO BOX 336	6						
		SPOKANE V	VA 99019						
INCOME: (Estimate of avera	ge or projected monthly income at time case filed)		DEBTOR	S	SPOUSE				
1. Monthly gross wages, sala	•		\$1,647.75_	\$	3,668.34				
(Prorate if not paid mo									
2. Estimated monthly overting	me		\$0.00_	\$	0.00				
3. SUBTOTAL			\$ <u>1,647.75</u>	\$	3,668.34				
4. LESS PAYROLL DEDUC	CTIONS								
 a. Payroll taxes and soc 	ial security		\$	\$_	296.62				
b. Insurance	iai security		\$	\$	22.92				
c. Union Dues			\$0.00	\$	0.00				
d. Other (Specify: (D)	(S)L&I)	\$	\$_	7.32				
5. SUBTOTAL OF PAYROI	LL DEDUCTIONS		\$	\$_	326.86				
6 TOTAL NET MONTHLY	Y TAKE HOME PAY		\$_1,647.75	\$_	3,341.48				
7. Regular income from ope (Attach detailed statemen	ration of business or profession or farm		\$	\$_	0.00				
8. Income from real property			\$0.00	\$_	0.00				
9. Interest and dividends	,		\$0.00	\$_	0.00				
10. Alimony, maintenance	or support payments payable to the debtor for the								
debtor's use or that of dep	pendents listed above.		\$0.00	\$_	0.00				
11. Social security or other §			\$0.00	\$	507.20				
(Specify) (S)SOCIAL			Ψ	Ψ_	507.20				
12. Pension or retirement in			\$0.00	\$_					
13. Other monthly income_(S)		\$0.00	\$_	0.00				
(Specify)			\$0.00	\$_	0.00				
14. SUBTOTAL OF LINES	7 THROUGH 13		\$0.00	\$_	507.20				
15. AVERAGE MONTHLY	INCOME (Add amounts shown on Lines 6 and 14)		\$1,647.75	\$_	3,848.68				
16. COMBINED AVERAGE from line 15)	E MONTHLY INCOME (Combine column totals		\$	5,496.4	-3_				

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17.	Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
	laid off 10/08/09

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In re_	Ronald S. Bolen & Leasa M. Bolen	Case No
	Debtor	(if known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.	monthly expe	nses
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separat labeled "Spouse."	e schedule of	expenditures
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,100.00
a. Are real estate taxes included? Yes No		,
b. Is property insurance included? Yes No		
2. Utilities: a. Electricity and heating fuel	\$	250.00_
b. Water and sewer	\$	84.00
c. Telephone	\$	150.00_
d. Other <u>CABLE</u>	\$	120.00
3. Home maintenance (repairs and upkeep)	\$	150.00_
4. Food	\$	650.00_
5. Clothing	\$	120.00_
6. Laundry and dry cleaning		50.00
7. Medical and dental expenses		150.00
8. Transportation (not including car payments)		500.00_
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		100.00_
10.Charitable contributions	\$	0.00
11.Insurance (not deducted from wages or included in home mortgage payments)		0.00 -
a. Homeowner's or renter's	\$	40.00
b. Life		0.00
c. Health		75.00
d.Auto	\$ <u> </u>	240.00
e. Other	\$ <u> </u>	240.00
12.Taxes (not deducted from wages or included in home mortgage payments)	Ψ	
(Specify)	\$	0.00_
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	Ψ	
a. Auto	\$	0.00
b. Other	\$ \$	0.00
04		0.00
14. Alimony, maintenance, and support paid to others		0.00
15. Payments for support of additional dependents not living at your home	Φ	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	Φ	425.00
	Ф Ф	0.00
17. Other		0.00_
	\$	4,204.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data)	-£4L:- 1	4-
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing	of this docum	ient:
None		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule (Includes spouse income of \$3,848.68. See Schedule I)	\$	5,496.43
b. Average monthly expenses from Line 18 above	\$	4.204.00
c. Monthly net income (a. minus b.) (Net includes Debtor/Spouse combined Amounts)	\$	1,292.43
(Tet includes Devol/spouse contolled failbuilts)	T	

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United States Bankruptcy Court

Eastern District of Washington

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 0.00		
B – Personal Property	YES	3	\$ 31,145.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 37,751.96	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	4		\$ 24,612.36	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 5,496.43
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 4,204.00
тот	FAL	16	\$ 31,145.00	\$ 62,364.32	

United States Bankruptcy Court Eastern District of Washington

In re	Ronald S. Bolen & Leasa M. Bolen	Case No.		
	Debtor			
		Chapter	13	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

State the Following:

Average Income (from Schedule I, Line 16)	\$	5,496.43		
Average Expenses (from Schedule J, Line 18)	\$	4,204.00		
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$	7,435.88		

State the Following:

State the Following.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 13,091.96
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 24,612.36
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 37,704.32

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	Debtor		(If known)
In re		Case No.	
	Ronald S. Bolen & Leasa M. Bolen		

I declare under penalty of perjury that I have read th are true and correct to the best of my knowledge, information,	ne foregoing summary and schedules, consisting of18 sheets, and that they , and belief.
Data 10/09/2009	Signature: /s/ Ronald S. Bolen
Date	Debtor:
Date 10/09/2009	Signature: /s/ Leasa M. Bolen
Date	(Joint Debtor, if any)
	[If joint case, both spouses must sign.]
DECLARATION AND SIGNATURE OF NON-AT	TTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
110(h) and 342(b); and, (3) if rules or guidelines have been prom	document and the notices and information required under 11 U.S.C. §§ 110(b), nulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable of the maximum amount before preparing any document for filing for a debtor or
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an individual, state the name, title who signs this document.	(if any), address, and social security number of the officer, principal, responsible person, or partne
Address	
X Signature of Bankruptcy Petition Preparer	
Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all other individuals who prepared or a	assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:
If more than one person prepared this document, attach additional signed she	eets conforming to the appropriate Official Form for each person.
A bankruptcy petition preparer's failure to comply with the provisions of title 11 an 18 U.S.C. § 156.	nd the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110
DECLARATION UNDER PENALTY OF PERJ	JURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
I, the [the preside	ent or other officer or an authorized agent of the corporation or a member
	[corporation or partnership] named as debtor
in this case, declare under penalty of perjury that I have read the shown on summary page plus 1), and that they are true and correct	foregoing summary and schedules, consisting ofsheets (total ct to the best of my knowledge, information, and belief.
Date	Signature:
	[Print or type name of individual signing on behalf of debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

UNITED STATES BANKRUPTCY COURT

Eastern District of Washington

In Re	Ronald S. Bolen & Leasa M. Bolen	Case No.	
		(if known)	Ī

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT		SOURCE
2009(db)	28365.13	APOLLO VALLEY MECHANICAL	
2008(db)	35810.00	BANNER FUEL	
2007(db)	28458.00	EMPLOYMENT	
2009(jdb)	32270.66	CPM DEVELOPMENT	
2008(jdb)	43901.99	CPM DEVELOPMENT	
2007(jdb)	40678.63	CPM DEVELOPMENT	

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOU	NT		SOURCE
2009 (db)	1030.00	UNEMPLOYMENT	
2008(db)	1524.00		
2009(jdb)	4563.00	SOCIAL SECURITY	
2008(jdb)	6084.00	SOCIAL SECURITY	

None

3. Payments to creditors

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Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT AMOUNT STILL PAYMENTS PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternativerepayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT AMOUNT STILL AND RELATIONSHIP TO DEBTOR PAYMENTS PAID OWING

None

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c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Elizabeth M. McBride McBride Law Office 1201 N Ash, #101 Spokane WA 99201 PRIOR TO FILING

500.00 PLUS FF 1500.00 IN PLAN

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

 \bowtie

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY OR
DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME ANDTYPE OF ACCOUNT, LAST FOURAMOUNT ANDADDRESS OFDIGITS OF ACCOUNT NUMBER,DATE OF SALEINSTITUTIONAND AMOUNT OF FINAL BALANCEOR CLOSING

US BANK CHECKING 2009

LIBERTY LAKE WA 406405 NEGATIVE BALANCE

Closing Balance: -1017.00

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF AMOUNT OF

SETOFF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

5312 W HEDGEWOOD POST FALLS ID 83854 RONALD BOLEN LEASA BOLEN 06/2003 TO 06/2008

16. Spouses and Former Spouses

None

 \boxtimes

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE

ENVIRONMENTAL LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

 \boxtimes

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE

ENVIRONMENTAL LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business



If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS BEGINNING AND

ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

X

NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	10/09/2009	Signature _ of Debtor	/s/ Ronald S. Bolen
			RONALD S. BOLEN
Date	10/09/2009	Signature	/s/ Leasa M. Bolen
-		of Joint Debtor	LEASA M. BOLEN

0		-14-	- 4411
U	continuation	sheets	attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110(c).)		
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, partner who signs this document.	s, and social security number of the officer, principal, responsible person, or		
<u> </u>			
Address			
X			
Signature of Bankruptcy Petition Preparer	Date		

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT

Eastern District of Washington NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

B201 Page 2

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of
XSignature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.	the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Ronald S. Bolen & Leasa M. Bolen	x/s/ Ronald S. Bolen	10/09/2009
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X/s/ Leasa M. Bolen	10/09/2009
, , ,	Signature of Joint Debtor ((if any) Date

ALLIED INTERSTATE PO BX 361477 COLUMBUS OH 43236

AMERICAN EAGLE OUTFITTERS PO BOX 981064 EL PASO TX 79998-1064

BENEFICIAL FINANCE PO BOX 3425 BUFFALO NY 14240

CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130-0285

CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130-0285

CITIFINANCIAL 101 IRONWOOD DR #133 COERU D'ALENE ID 83814

FASHION BUG 745 CENTER ST MILFORD OH 45150-1324

FAST BUCKS OF POST FALLS LLC 3869 W RIVER BEND POST FALLS ID 83854

GE MONEY BANK
ATTN: BANKRUPTCY DEPT
PO BOX 103104
ROSWELL GA 30076

GE MONEY BANK
ATTN: BANKRUPTCY DEPT
PO BOX 103104
ROSWELL GA 30076

HSBC CARD SERVICE PO BOX 81622 SALINAS CA 93912-1622

HSBC RETAIL SERVICES PO BOX 5244 CAROL STREAM IL 60197-5244

SEARS CREDIT CARDS PO BOX 6283 SIOUX SD 57117

US BANK HWY 27 & 32ND AVE ALBERTONS 9208 E SPRAGUE AVE SPOKANE VALLEY WA 99206

WACHOVIA
PO BOX 659558
SAN ANTONIO TX 78265-9558

WACHOVIA
PO BOX 659558
SAN ANTONIO TX 78265-9558

WELLS FARGO FINANCIAL 411 W HAYCRAFT STE B2 COEUR D' ALENE ID 83815

WELLS FARGO FINANCIAL CARDS PO VOX 5943 SIOUX FALLS SD 57117

United States Bankruptcy Court Eastern District of Washington

I	n re Ronald S. Bolen & Leasa M. Bolen	Case No.	
		Chapter	13
Ι	Debtor(s)	1	
	DISCLOSURE OF COMPENSATION O	F ATTORNEY FOR DEBTO	R
a	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert and that compensation paid to me within one year before the filing andered or to be rendered on behalf of the debtor(s) in contemple	of the petition in bankruptcy, or agre	ed to be paid to me, for services
F	or legal services, I have agreed to accept	\$2,000.00_	, .
	rior to the filing of this statement I have received		_
В	alance Due	\$1,500.00	_
	he source of compensation paid to me was:		
	☑ Debtor ☐ Other (specify)		
. Т	The source of compensation to be paid to me is:		
	Debtor Other (specify)		
	I have not agreed to share the above-disclosed compensation ates of my law firm.	n with any other person unless they	are members and
of my l	I have agreed to share the above-disclosed compensation waw firm. A copy of the agreement, together with a list of the name		
. 1	n return for the above-disclosed fee, I have agreed to render leg	al service for all aspects of the bankr	uptcy case, including:
	 a. Analysis of the debtor's financial situation, and rendering advice b. Preparation and filing of any petition, schedules, statements of a c. Representation of the debtor at the meeting of creditors and con 	ffairs and plan which may be required;	;
6.	By agreement with the debtor(s), the above-disclosed fee does no	include the following services:	
	CE	RTIFICATION	
	I certify that the foregoing is a complete statement of any debtor(s) in the bankruptcy proceeding.	agreement or arrangement for payme	ent to me for representation of the
	10/09/2009	/s/ Elizabeth M. McBride	
	Date	Signature of	Attorney
		Name of law	firm

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		According to the calculations required by this statement:
In re	Ronald S. Bolen & Leasa M. Bolen	The applicable commitment period is 3 years.
	Debtor(s)	The applicable commitment period is 5 years.
		☑ Disposable income is determined under § 1325(b)(3).
Case I	Number: (If known)	Disposable income not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedule I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

jointly. Joint debtors may complete one statement only.								
		Part I. REPOR	T OF INCOME					
	Marita	Il/filing status. Check the box that applies and con	nis sta	atement as	dire	cted.		
		Unmarried. Complete only Column A ("Debtor's Married. Complete both Column A ("Debtor's In		e's Li	ncome") fo	or Li	nes 2-10.	
1	six cal	ures must reflect average monthly income received lendar months prior to filing the bankruptcy case, er the filing. If the amount of monthly income varied the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month total by six, and enter the result on the six-month six	nding on the last day of the month during the six months, you must		Column A Debtor's Income		Column B Spouse's Income	
2		wages, salary, tips, bonuses, overtime, commis		\$	3,639.14	\$	3,118.08	
3	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.							
	a.	Gross receipts	\$ 0.00					
	b.	Ordinary and necessary business expenses	\$ 0.00					
	C.	Business income	Subtract Line b from Line a	\$	0.00	\$	0.00	
	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.							
4	a.	Gross receipts	\$ 0.00					
	b.	Ordinary and necessary operating expenses	\$ 0.00					
	C.	Rent and other real property income	Subtract Line b from Line a	\$	0.00	\$	0.00	
5	Intere	est, dividends and royalties.		\$	0.00	\$	0.00	
6	Pensio	on and retirement income.		\$	0.00	\$	0.00	
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.					\$	0.00	
8	Howev was a	ployment compensation. Enter the amount in the er, if you contend that unemployment compensation benefit under the Social Security Act, do not list the n A or B, but instead state the amount in the space	n received by you or your spouse amount of such compensation in		507.00			
		mployment compensation claimed to benefit under the Social Security Act Debtor \$_	0.00 Spouse \$ 0.00	\$	171.66	\$	0.00	

	Income from all other sources. Specify source and amount. If necessary, list additional						
9	sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.						
	a. \$ 0.00						
		0.00	\$ 0.00				
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	7.80	\$ 3,118.08				
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		7,435.88				
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOR)					
12	Enter the Amount from Line 11.	\$	7,435.88				
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you conter that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.						
	a. \$ 0.00						
	b. \$ 0.00						
	c. \$ 0.00						
	Total and enter on Line 13.	\$	0.00				
14	Subtract Line 13 from Line 12 and enter the result.	\$	7,435.88				
15	Annualized current monthly income for §1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$	89,230.56				
16	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
	a. Enter debtor's state of residence: Washington b. Enter debtor's household size: 4	\$	82,445.00				
	Application of §1325(b)(4). Check the applicable box and proceed as directed.						
17	The amount on Line 15 is less than or equal to the amount on Line 16. Check the applicable commitment period is 3 years" at the top of page 1 of this statement and continue with						
	The amount on Line 15 is more than the amount on Line 16. Check the box for "Th commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.		icable				
Pa	rt III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABI	E I I	NCOME				
18	Enter the Amount from Line11.	\$	7,435.88				

19	the total househor Column than the necessa	Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the nousehold expenses of you or your dependents. Specify, in the lines below, the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.								
	a.					\$	0.00	7		
	b.					\$	0.00	1		
	C.					\$	0.00			
	Total aı	nd enter on Line 19.							\$	0.00
20	Currer	nt monthly income for §1	325(b)(3)	Sub	tract Line 19 fror	m Line 1	8 and en	iter the result	. \$	7,435.88
21		lized current monthly in hber 12 and enter the result.	come for §	1325	(b)(3). Multip	ly the a	mount fro	om Line 20 by	, \$	89,230.56
22	Applic	able median family inco	me. Enter th	ne am	ount from Line 1	6.			\$	82,445.00
	Applic	ation of §1325(b)(3). C	heck the appli	cable	box and proceed	as dire	cted.			52,115.00
23	is st	he amount on Line 21 is determined under §1325(b)(3 atement. he amount on Line 21 is)." at the top	of pa	ge 1 of this state	ment an	id comple	ete the remain	ning pa	arts of this
	in in	come is not determined under is statement. Do not comple	§1325(b)(3)"	at th	e top of page 1 c					
		Part IV. CALC	JLATI ON	OF	DEDUCTI O	NS FF	II MOS	NCOME		
	Subpa	art A: Deductions un	der Stand	dard	ds of the In	terna	I Reve	enue Serv	/ice	(IRS)
24A	miscel the app	nal Standards: food, clot llaneous. Enter "Total" amo licable family size and income k of the bankruptcy court.)	unt from IRS	Natio	nal Standards for	Allowab	le Living	Expenses for		1,370.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years or older. (The total number of household members must be the same as the number stated in Line 16b). Multiply line a1 by Line b1 to obtain a total amount for household members 65, and enter the result in Line c1. Multiply line a2 by Line b2 to obtain a total amount for household members 65						S			
	House	ehold members under 65 ye	ears of age	Hous	sehold member	s 65 ye	ars of a	ge or older		
	a1.	Allowance per member	60.00	a2.	Allowance per	r membe	er	144.00		
	b1.	Number of members	4	b2.	Number of m	embers		0		
	c1.	Subtotal	240.00	c2.	Subtotal			0.00	\$	240.00
	Local Standards: housing and utilities; non-mortgage expenses Enter amount of the IRS							240.00		
25A	Housing	g and Utilities Standards; non-	mortgage exp	enses	for the applicable	le count	y and ho	usehold size.		
	(This in	formation is available at www	usaoj.gov/usi	<u>/</u> or f	om the cierk of t	ure pank	a upicy c	our (.)	\$	481.00

Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards: mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/usf/ or from the clerk of the bankruptey court): enter on Line b the total of the Average Monthly Payments for any debts secured by your hone, as stated in Line 47: subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. SPOKANE COUNTY						1			
Average Monthly Payment for any debts secured by your bonne, if any, as stated in Line 47 \$ 0.00 \$ 0.00 \$ \$ 0.00 \$ 0.00 \$ \$ 0.00 \$ \$ 0.00 \$ \$ 0.00 \$ \$ 0.00 \$ \$ 0.00		amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47 subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.							
b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25Å and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. WEST REGION Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. □ 0 □ 1 □ 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation for the applicable unber of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation expenses. enter on the 27B the "Public Transportation" amount from the IRS Local Standards: Transportation expenses expenses of the public transportation or your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation on ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)	250	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	1,078.00				
Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. WEST REGION Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 0 1 1 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at https://www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation: additional public transportation expenses. If you pay the operating expenses for a vehicle and also use public transportation expenses. If you pay the operating expenses for a vehicle and also use public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation expenses, enter on Line 27B the "Public Transportation" amount from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. 3 or more. 3 or more than two vehicles.) 2 or more. 3 or more. 3 or more than two vehicles.) 3 or more. 3 or more	236	b.		\$	0.00				
Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Cocal Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. WEST REGION		C.	Net mortgage/rental expense	Subtract Lir	ne b from Line a.	\$	1,078.00		
You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. WEST REGION Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. □ 0 □ 1 ☑ 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) ☑ 1 □ 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b fr	26	Lines 25. Housing	Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:						
Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation, and you contend that you are entitled to an additional deduction for your public transportation, and you contend that you are entitled to an additional deduction for your public transportation, and you contend that you are entitled to an additional deduction for your public transportation, and you contend that you are entitled to an additional deduction for your public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense. (You may not claim an ownership/lease expense for wore than two vehicles.) Local Standards: transportation ownership/lease expense. (You may not claim an ownership/lease expense for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line and enter the result in Line 28. Do not enter an amount less than zero. B. Average Monthly Payment for any debts secured by Vehicle	27A	You are of operating Check the expenses of you characteristics.	You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. WEST REGION Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. O 1 V 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards:						
the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) Interview of the interview of the bankruptcy court); enter in Line be the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line be from Line and enter the result in Line 28. Do not enter an amount less than zero. Interview of the interview of the bankruptcy court); enter in Line be the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line be from Line and enter the result in Line 28. Do not enter an amount less than zero. Interview of the interview of the interview of the bankruptcy court); enter in Line 47; subtract Line be from Line and enter the result in Line 28. Do not enter an amount less than zero. Interview of the inter		Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk							
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(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, First Car \$ 489.00 b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 \$ 400.00 c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a line and li		Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease							
a. IRS Transportation Standards, Ownership Costs, First Car \$ 489.00 b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 \$ 400.00	28	(available Average	(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from						
1, as stated in Line 47 \$ 400.00		a.	IRS Transportation Standards, Ownership Costs, First Car	\$	489.00				
c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a		b.		\$	400.00				
		C.	Net ownership/lease expense for Vehicle 1	Subtract	Line b from Line a.	\$	89.00		

Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401 (k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or								
a. IRS Transportation Standards, Ownership Costs, Second Car b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, unlond dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401 (k) contributions. Other Necessary Expenses: Ilfe insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in	20	only if you Enter, in (available that Aver	u checked the "2 or more" Box in Line 28 Line a below, the "Ownership Costs" for "One Car" from the IRS Le at www.usdoj.gov/ust/ or from the clerk of the bankruptcy courrage Monthly Payments for any debts secured by Vehicle 2, as sta	Local Standards: Transportation t); enter in Line b the total of ted in Line 47; subtract Line b				
D. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly appropriate deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401 (k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. Other Necessary Expenses: telecommunication services other than your basic home telephone and cell phone s	27	I I I I I I I I I I I I I I I I I I I						
Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401 (ks) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line		b.		\$ 536.00				
Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 2		C.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	¢	0.00		
payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions. 201 32 Other Necessary Expenses: Ilfe insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. 33 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. 34 Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 35 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. 36 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. 37 Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet se	30	for all for self emplo	all federal, state and local taxes, other than real estate and sales	taxes, such as income taxes,		1,182.00		
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you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	32	actually pay for term life insurance for yourself. Do not include premiums on your dependents, for						
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236 expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. 24 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. 25 Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 28 Tatal Europeans Allowed and Allow	34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged						
actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 38 Tatal Expenses Allegards and DC Standards of the literature of the extent	35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other						
amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 0	36	actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings						
Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. \$ 5,510	37	amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service – such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount						
	38	Total E	xpenses Allowed under IRS Standards. Enter the total	of Lines 24 through 37.	\$	5,510.92		

			Çuh	nart R: Additional Living Evr	onso Doduct	ions		6	
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37									
	mo	onthly e		ty Insurance and Health Savies set out in lines a-c below that an					
		a.	Health Insurance		\$	84.00			
39		b.	Disability Insurance		\$	0.00			
		C.	Health Savings Accou	nt	\$	0.00			
	T	otal ar	d enter on Line 39				\$	84.00	
	S	f you o pace b \$		d this total amount, state your ad	ctual average ex	penditures in the			
40	ave su	erage a	ctual monthly expenses f an elderly, chronically	the care of household or fait that you will continue to pay for the ill, or disabled member of your hou ach expenses. Do not include pay	ne reasonable an sehold or memb	nd necessary care and per of your immediate	\$	0.00	
41	ex Pre	penses eventio	that you actually incur	violence. Enter the total average to maintain the safety of your fami ther applicable federal law. The nat	y under the Fan	nily Violence	\$	0.00	
42	Ho by mu	ome e IRS Lo ust pro	nergy costs. Enter t cal Standards for Housi ovide your case truste	he total average monthly amount, ing and Utilities that you actually exert with documentation of your a lal amount claimed is reasonable.	pend for home e ctual expenses	energy costs. You s, and you must	\$	0.00	
43	Ed exp ele you the	lucation penses mentar ur case	on expenses for de that you actually incur, y or secondary school be trustee with docum- unt claimed is reasona	pendent children under 18. E not to exceed \$137.50 per child, fo by your dependent children less tha entation of your actual expense able and necessary and not alre	Enter the total avor attendance at n 18 years of ags, and you mus	verage monthly a private or public e. You must provide st explain why the	\$	0.00	
44	food the at_v	d and c IRS Na www.us	lothing expenses exceentional Standards, not to adoj.gov/ust/or from the	g expense. Enter the total averaged the combined allowances for food to exceed 5% of those combined allowed court.) You easonable and necessary.	and clothing (ap wances. (This ir	pparel and services) in nformation is available		0.00	
45	ch in	aritable in the	e contributions in the form of cash or financia	Enter the amount reasonably necestry of cash or financial instruments il instruments to a charitable organiany amount in excess of 15% or	to a charitable c ization as define	organization as defineded in 26 U.S.C. §		0.00	
 46				Deductions under § 707(b). E	-		\$	84.00	
			·	ubpart C: Deductions for [-	<u> </u>	04.00	
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes and insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in th 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.								
		N	lame of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?			
	a.	Wach	ovia	2004 Chrysler	\$ 245.				
	b.	Wach	ovia	2006 Dodge	\$ 368.				
	c.	GE M	oney Bank	Honda Motorcycle	\$ 78.				
					Total: Add Lin a, b and c	ies	\$	692.83	
								072.03	

48	res dep pay pro rep	idence, a motor vehicle, or other propendents, you may include in your content the creditor in addition to the payreperty. The cure amount would inclu	operty necessary for your support of leduction 1/60th of any amount (the ments listed in Line 47, in order to not any sums in default that must be otal any such amounts in the follow Property Securing the Debt	r the support of your e "cure amount") that you mu naintain possession of the e paid in order to avoid	nt 0		
				Total: Add Lines a, b and	<u>c</u> \$	0.00	
49	clai	ims, such as priority tax, child supp	ty claims. Enter the total amount, ort and alimony claims, for which yoe current obligations, such as the	ou were liable at the time of	\$	0.00	
	ent	er the resulting administrative expe		1	nd		
50	b.			\$ 0.00			
	_	or from the clerk of the bank	ruptcy court.)	x 7.1 %	_		
	C.	Average monthly administrat	ive expense of Chapter 13 case	Total: Multiply Lines a and	<u>b</u> \$	0.00	
51	То	tal Deductions for Debt Payr	nent. Enter the total of Lines 47 th	nrough 50.	\$	692.83	
		Subpar	rt D: Total Deductions fror	m Income			
52	То	tal of all deductions from inc	ome. Enter the total of Lines 38, 4	6, and 51.	\$	6,287.75	
		Part VI. DETERMINATIO	ON OF DISPOSABLE INC	OME UNDER § 132	5(b)(2	2)	
53	Total current monthly income. Enter the amount from Line 20.						
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.						
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all repayments of loans from retirement plans, as specified in § 362(b)(19).						
56	То	tal of all deductions allowed	under § 707(b)(2). Enter the a	amount from Line 52.	\$	6,287.75	

Date: 10/09/2009

	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of theses expenses and you must provide a detailed explanation of the special circumstances that make such expenses necessary and reasonable.					
57		Nature of special circumstances Amount of expense	\exists			
	a.	\$				
	b.	\$				
	C.	\$				
		Total: Add Lines a, b an	d c \$	0.00		
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56 and 57 and enter the result.					
59	Mo the	er \$	1,148.13			
	•	Part VI: ADDITIONAL EXPENSE CLAIMS				
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are rehealth and welfare of you and your family and that you contend should be an additional deduction from you income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures shaverage monthly expense for each item. Total the expenses.					
60		Expense Description Monthly				
	a.	\$	0.00			
	b.	\$	0.00			
	C.	\$	0.00			
		Total: Add Lines a, b and c	0.00			
	l .	Part VII: VERIFICATION				
	I ded	clare under penalty of perjury that the information provided in this statement is true and correct. debtors must sign.)	(If this a	ioint case,		

Signature: _

/s/ Leasa M. Bolen

(Joint Debtor, if any)

Income Month 1			Income Month 2		
Gross wages, salary, tips	4,213.50	3,668.34	Gross wages, salary, tips	4,016.87	3,668.3
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	507.00	0.00	Contributions to HH Exp	507.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 3			Income Month 4		
Gross wages, salary, tips	5,618.00	3,668.34	Gross wages, salary, tips	3,803.00	3,668.3
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	507.00	0.00	Contributions to HH Exp	507.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 5			I ncome Month 6		
Gross wages, salary, tips	2,377.00	3,668.34	Gross wages, salary, tips	1,806.52	366.
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.
Contributions to HH Exp	507.00	0.00	Contributions to HH Exp	507.00	0.
Unemployment	464.00	0.00	Unemployment	566.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.
Add	itional I	tems as	Designated, if any		